

**NEW JERSEY DIVISION OF GAMING ENFORCEMENT
TECHNICAL SERVICES BUREAU**

BILL VALIDATOR HARDWARE SUBMISSION

Bill Validator Hardware submitted by: _____

Manufacturer of Bill Validator: _____

Make and Model of Bill Validator: _____

Make and Model of Acceptor Unit: _____

Is this an Emergency submission?

Yes ☐ No ☐ N/A ☐

If YES, attach a Deficiency Report.

Bill Validator Program ID as submitted: _____

Bill Validator / Submitted Hardware included?

Yes ☐ No ☐ N/A ☐

Included are: Manual ☐ Schematics ☐ Wiring Diagrams ☐ Mechanical Prints ☐

Does Bill Validator and Hardware replace previous approval?

Yes ☐ No ☐ N/A ☐

If YES, identify the previously approved Bill Validator / Hardware DGE Approval # (MO / PA):

Explain why previously approved Bill Validator / Hardware should not be revoked from use?

If YES, identify the Bill Validator / Hardware to be revoked.

Reasons for submission, (if no Deficiency Report is attached):

Describe changes:

Does the Bill Validator become inoperable when any access door is opened?

Yes ☐ No ☐ N/A ☐

Are DIP switches and/or Jumper settings used with the submitted Bill Validator / Hardware?

Yes ☐ No ☐ N/A ☐

If YES, provide explanation of settings available.

Key Controls: N.J.A.C. 19:45-1.16 and N.J.A.C. 19:34-1.36

The Bill Validator has:

The capacity for two locks securing the compartment housing the Cash Storage Box?

Yes ☐ No ☐ N/A ☐

Describe:

The capacity for two locks securing the contents placed into the Cash Storage Box?

Yes ☐ No ☐ N/A ☐

Describe or attach picture/drawing:

Does the Bill Validator have a Serial Number permanently affixed?

Yes ☐ No ☐ N/A ☐

Cash Box:

Cash/Coupon Storage Capacity: _____ **Verified?**

Yes ☐ No ☐ N/A ☐

“Cash Box Full” Sensor?

Yes ☐ No ☐ N/A ☐

Cash Box tested for locking integrity?

Yes ☐ No ☐ N/A ☐

Cash Box prohibits any access to its contents while locked?

Yes ☐ No ☐ N/A ☐

Acceptor:

Identify and describe the components used to validate bills and/or coupons:

Identify and describe the effects of non-acceptance, multiple rejections, tilts and malfunctions:

Are any of the hardware parts created, enhanced, modified, or developed by any person or persons not employed by your company?

Yes ☐ No ☐

If YES, provide details:

CERTIFICATION

I _____ am the _____ of _____, a company authorized by the
NAME TITLE MANUFACTURER

N.J. Casino Control Commission to manufacture slot machines for distribution to and use by N.J. licensed casinos. I personally have been found qualified or have applied for a finding of qualification by the N.J. Casino Control Commission in connection with the company's licensure. I hereby certify that this submission and the attachments submitted herewith have been completed accurately and that the information provided is correct and the tests stated therein as completed have in fact been completed. I understand that if any of the statements contained in this Certification are willfully false, I am subject to punishment. Such punishment may include the suspension, revocation or denial of my personal qualification status, the imposition of a civil penalty against me personally, the suspension or revocation of the company's licensure, and/or the imposition of a civil penalty against the company.

Authorized Signature

Date

Date Received

PRINT NAME